

**MOTOROLA****FACSIMILE***Re-sent to include copy
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MAR 24 2004

DATE: March 24, 2004**TO:** Ted M. Wang (703) 305-0373
(ADDRESSEE) (EXTENSION)PTO (703) 872-9306
(LOCATION) (FAX NUMBER)**FROM:** Pat Thomas for Robert King (512) 996-6839
(SENDER) (EXTENSION)**OFFICIAL****TOTAL NUMBER OF PAGES** 17 (Including this page)*****
IF YOU HAVE ANY TROUBLE OR QUESTIONS WITH TRANSMISSION, OR HAVE RECEIVED IT IN
ERROR, PLEASE CALL: (512) 996-6839
*******Docket No.:** SC11507ZC
Applicant: William Eric Maln et al.
Serial No.: 09/746,277
Art Unit: 2631
Filed: December 21, 2000**ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:**

1.	x	1 page Facsimile Cover Sheet
2.	x	1 page Fee Transmittal in duplicate
3.	X	14 page Amendment

Paid by Deposit Account 502117, Motorola, Inc.: \$86

If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account 502117.

**I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS
BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE AND THAT
THE ASSIGNMENT ATTACHED HERETO IS A TRUE COPY OF THE ORIGINAL:****ON:** 3-24-04
DatePat Thomas
Signature**MOTOROLA LAW DEPARTMENT
7700 W. PARMER LANE MD: TX32/PL02
AUSTIN, TEXAS 78729
Fax Number (512) 996-6854****NOTICE:** This facsimile transmission may contain information that is confidential, privileged or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to legal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.

FEE TRANSMITTAL		Complete if Known	
Patent fees are subject to annual revision		Application Number	09/746,277
		Filing Date	December 21, 2000
		First Named Inventor	William Eric Main
		Examiner Name	Ted M. Wang
		Group Art Unit	2634
TOTAL AMOUNT OF PAYMENT		(\$)	86
Attorney Docket No.		SC11507ZC	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																																																																
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number: 502117 Deposit Account Name: Motorola, Inc. <input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27																																																																																																																																																																																																	
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SUBMITTED BY Name (Print/Type): Robert L. King Signature: <i>Robert L. King</i> Registration No.: 30,185 Telephone: (512) 996-8839 Date: March 24, 2004																																																																																																																																																																																																	